## F 0 43 R TC43011 M 10.05.01

## **IDAHO PART-YEAR RESIDENT & NONRESIDENT INCOME TAX RETURN**

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Z	U	U	

10	-05-01										
Ame	nded F	Return -									
		s page 10, for THE REASONS							· ARF	W M	
		G, and enter the number.									
For c	alenda	r year 2001, or fiscal year beginning	l					1			
		Your first name and initial		Last name			Your Soc	ial Security Number	i		
Haal	DALIO										
	DAHO bel.	Spouse's first name and initial Last name				Spouse's Social Security Number					
	rwise,										
please	print or	Address (number street and anademont number)					IMPORTANT	rı 🛦			
ty	pe.								u <b>must</b> enter	- —	
		City, State and Zip Code				SSN(s) above.					
Do yo	u need	Idaho income tax forms mailed to y	ou next year?	• 🔲 `	Yes .	No					
	ency st		dent Idah	Resident on Ad	ctive Military	Duty Nonresid	lent Part-Year Res	sident	Military Nonre	sident	
and on	one for your e for your at return.	ourself 1. Yourself r spouse 2. Spouse 1		2 -		3 🔭	4 -		5		
		n Idaho this year •Yourself	_ • Spouse _								
Fili	ng statu	IS If filing married joint or separate		otions Enter		e number	Election cam	paign f	und		
		return, enter spouse's name and social security number above.	claime	d on federal	return.		I want \$1 of my income tax to go to the Idaho				
1.	Sir	ngle	a. \	ourself	ourself If parents, or some			-	nd (\$2 on joint r		
2.	Ma	arried filing joint return	Ⅰ . —	Spouse	) your s	, can claim you (or spouse) as	7. Yourself 8. Sp	ouse	7. Yourself	8. Spouse	
3.	Ma	arried filing separate return	I —	Other depend		dents,´enter "0").	Constitution		Reform	•	
4.	He	ead of household	. —	•	al exemptions		Democratic •		Republican	•	
5.	Qu	ıalifying widow(er)		·			Libertarian -		No Specific	•	
							Natural Law		None	-	
	IDAHC	INCOME. See instructions, page 10.							Idaho Amount		
쀭	9. W	ages, salaries, tips, etc. Attach Form	ı(s) W-2					9		00	
TACH STATE W-2 COPIES HERE	10. Ta	D. Taxable interest income. Attach federal Schedule B if over \$400.					10		00		
ES	11. Di	Dividend income. Attach federal Schedule B if over \$400.					11		00		
Ğ.	12. Ali	Alimony received						12		00	
-20	13. Bu	Business income or (loss). Attach federal Schedule C or C-EZ.						13		00	
≥ П	14. Ca	Capital gain or (loss). If required, attach federal Schedule D.						14		00	
₹	15. Ot	Other gains or (losses). Attach federal Form 4797.						15		00	
E S	16. IR	IRA distributions (taxable amount)					16		00		
AC		Pensions and annuities (taxable amount)					17		00		
₩		Rents, royalties, partnerships, S corporations, trusts, etc. Attach federal Schedule E					18		00		
		. Farm income or (loss). Attach federal Schedule F					19		00		
		nemployment compensation						20		00	
퓠		her income. Attach explanation					······································	21		00	
ATTACH PAYMENT HERE		OTAL INCOME. Add lines 9 through 21.	44					22		00	
Ę		ADJUSTMENTS. See instructions, p	_					22		00	
Σ		Deductions for IRAs and medical savings accounts					23		00		
¥  ∣		Moving expenses. Attach federal Form 3903 or 3903-F  Deductions for self-employment tax, health insurance and retirement plan					25		00		
ᆽ		Penalty on early withdrawal of savings					26		00		
ĕ∣		Deductions for student loan interest and alimony paid					27		00		
¥		B. TOTAL ADJUSTMENTS. Add lines 23 through 27.					28		00		
		DJUSTED GROSS INCOME. Subtract I	-					29		00	
- [		180 days of receiving this return, the Ida			nay contac	ct the paid prepare					
	Under	penalties of perjury, I declare that to the b	est of my know	rledge and be	elief this r	eturn is true, correc	ct and complete.				
	Your signa	ature		Date		Paid preparer's signatur	re	Prepare	er's EIN, SSN, or PT	IN	
SIGN	Snouso's	signature (if a joint return, BOTH MUST SIGN)		Doutimo =h===		Address and there	whor	•			
HERE	Spouse's	Signature (ii a joint return, DOTH MUST SIGN)		Daytime phone		Address and phone nun	liber				

Form 43 (2001) TC43011-2 10-05-01			Column A - Total		Column B - Idaho			
	30. Enter amount from federal Form 1040, line 33, 1040A, line 19, or 1040EZ, line 4							
STS	in Column A. Enter amount from line 29 in Column B.	. • 30		00		00_		
Ē	31. Additions from Form 39NR, Part A, line 4.			00		00_		
UST	32. Income after additions. Add lines 30 and 31.	32		00		00		
ADJUSTMENTS	33. Subtractions from Form 39NR, Part B, line 24	. 33		00		00		
`	34. TOTAL ADJUSTED INCOME. Subtract line 33 from line 32.	<b>3</b> 4		00	•	00		
	35. a. Check if age 65 or older Vourself Spouse	h C	heck if blind	Y	Yourself Spor	use		
	c. If your parent or someone else can claim you as a dependent, che		·		= :			
04-	ndard 36. Itemized deductions. Attach federal Schedule A. Federal limits app				36	00		
		•			37	00		
	Most				38	00		
Pe	ople 38. Subtract line 37 from line 36.				39	00		
Si	39. Standard deduction. See instructions, page 12, if you checked any bringle:				40			
	$_{1,550}$ 40. Multiply \$2,900 by the number of exemptions claimed on line 6d. Fed					00		
	41. Add line 40 and the LARGER of line 38 or line 39				41	00_		
	ed of sehold: 42. Idaho percentage. Divide line 34, Column B, by line 34, Column A			+	42	<u>%</u>		
l l	43. Multiply amount on line 41 by the percentage on line 42 and enter the	result	here		43	00		
	44. Idaho taxable income. Subtract line 43 from line 34, Column B			•	44	00		
l l		d filing						
	0,100 45. TAX from tables of fate scriedule. See instructions, page 20				45	00		
	46. Income tax paid to other states. Attach Form 39NR and other state re				47			
l l	ed filing arately: 47. Credit for contributions to educational entities			⊦		00		
	48. Investment tax credit. Attach Form 49 Earned •		Allowed	••• ⊦	48	00		
	49. Credit for contributions to youth and rehabilitation facilities			··· -	49	00		
	alifying ow(er): 50. Credit for production equipment using post-consumer waste			•	50	00		
	(600 51 Natural resources conservation credit				51	00		
	52. Promoter-sponsored event credit				52	00		
	53. Credit for qualifying new employees. Attach Form 55 Earned				53	00		
	54. Credit for Idaho research activities. Attach Form 67 Earned				54	00		
	<del></del> -				55	00		
	55. Broadband equipment investment credit. Attach Form 68. Earned				56	00		
	56. Incentive investment tax credit. Attach Form 69 Earned •							
	57. Electronically filed return credit							
	58. Line 45 minus lines 46 through 57. If less than zero, enter zero.				58	00		
	59. Fuels tax due. Attach Form 75.				59	00		
X ~	60. Sales/Use tax due on mail order, Internet, and other nontaxed purchases				60	00		
₹ <sup>8</sup> ₹	61. Tax from recapture of Idaho investment tax credit. Attach Form 49R			ŀ	61	00		
HER TAX See page 14	62. Permanent building fund. Check the box if you are receiving Idaho public assist				62 10			
OTHER TAXES See page 14	63. TOTAL TAX. Add lines 58 through 62.	ance p	ayınıenıs					
	65. TOTAL TAX. Add liftes 56 trifough 62.			•	63	00		
DONATIONS See page 15	64. I wish to donate to the Nongame Wildlife Conservation Fund.			•	64	00_		
ONATION See page 15	65. I wish to donate to the Children's Trust Fund/Child Abuse Prevention	65	00					
NO B	66. TOTAL TAX PLUS DONATIONS. Add lines 63 through 65.	66						
						00		
	67. Grocery credit. Nonresidents do not qualify. See instructions, page 15				67			
۵. ع	68. Maintaining a home for family member age 65 or older, or developmentally disabl	68	00					
EN.	69. Special fuels tax refund Gasoline tax refund	[	69	00				
PAYMENTS See page 15	70. Idaho income tax withheld. Attach Form(s) W-2.		70	00				
₫ –	71. 2001 Form 51 payment(s) and amount applied from 2000 return				71	00		
	72. TOTAL PAYMENTS AND OTHER CREDITS. Add lines 67 through 71.				72	00		
	AMENDED RETURN ONLY. (Skip this step if you are not filing an amended re	turn \				+55		
O Z G		-			72	00		
N S S	73. Tax paid with or after the filing of the original return			⊦	73	00_		
AMENDED RETURN page 16	74. Overpayment, if any on original return or as adjusted			•∣	74	00_		
<b>4</b> –	75. Amended return — total payments and credits — subtract line 74 from the total	al of lin	es 72 and 73.		75	00		
	Original Return: If line 66 is more than line 72, GO TO LINE 76. If line 66 is less th	an line	72. GO TO LINE 79.					
	Amended Returns: If line 66 is more than line 75, GO TO LINE 76. If line 66 is less			<sub>'9.</sub>				
					76			
REFUND / TOTAL DUE See page 16	76. TAX DUE. Subtract line 72 (or line 75 if amended return) from line 66				76	00		
	77. Penalty • Interest from the due date • Enter total				77	00		
_  -  -	Check box if penalty is due to an ineligible withdrawal from an Idaho medical sa	vings a	ccount					
70T) % % 16	78. TOTAL DUE. Add lines 76 and 77	-			78	00		
D / TOTA See page 16	79. OVERPAID. Line 72 (or line 75 if amended return) minus lines 66 and 77			00				
ž i				-				
Ä	80. REFUND. Amount of line 79 to be refunded to you.	<b>8</b> 0		00				
Œ.	81. ESTIMATED TAX. Amount of line 79 to be applied to your 2002 estimated tax.				81	00		
	51. 25 125 7 54. 7 sinount of fino 75 to 56 applied to your 2002 could lated tax.							